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CHAMPVA POLICY MANUAL

CHAPTER: 2
SECTION: 24.1
TITLE: PROSTHETIC DEVICES AND SUPPLIES

AUTHORITY: 38 CFR 17.270(a) and 17.272(a)

RELATED AUTHORITY: PL-107-107 and 32 CFR 199.4(d)(3)(vii)

I. EFFECTIVE DATE

September 19, 1990.

April 1, 2005 for ACD (Augmentive Communication Devices)

II. PROCEDURE CODE(S)

A. CPT codes: 92330-92335, 92393, 97755

B. HCPCS Level II codes: E2500-E2599, L5000-L9900, V2623-V2629, V5336

III. DEFINITIONS

A. Prosthetic. A prosthetic or prosthetic device (prosthesis) determined by the Secretary of Defense to be necessary because of significant conditions resulting from trauma, congenital anomalies, or diseases.

B. Prosthetic supplies. Supplies that are necessary for the effective use of a prosthetic or prosthetic device.

IV. POLICY

A. The purchase of prosthetic devices is limited to artificial limbs and eyes, and voice prostheses, which include mechanical hand-held voice prostheses, as well as, ACDs (Augmentative Communication Devices), also referred to as SGDs (Speech Generating Devices). Surgical implants that are approved for use in humans by the FDA (Food and Drug Administration) are covered as an essential and integral part of an otherwise covered surgical procedure. Additionally, the following are covered:

1. Accessory or supply item, that are not considered deluxe, and used in conjunction with the prosthetic device for the purpose of achieving therapeutic benefit and proper functioning.

2. Services necessary to train the recipient of the device, and in the use of the device.

3. Repair of the prosthetic device for normal wear and tear or damage.

4. Customization of the prosthetic is covered when provided by an otherwise authorized provider.

B. Replacement of a prosthetic is covered when:

1. Prescribed by a physician.

2. Required due to growth or a change in the patient's condition.

3. The device is lost or irreparably damaged.

C. Surgical implants that are approved for use in humans by the FDA are covered as an essential and integral part of an otherwise covered surgical procedure.

V. POLICY CONSIDERATIONS

A. Claims for substitutions of a body part (prosthetic device) are not subject to the limitations and considerations that apply to durable medical equipment (see Chapter 2, Section 17.1, *Durable Medical Equipment and Supplies*).

B. Since prosthetic devices are custom made, requiring a physician's prescription/orders for their fitting and/or construction, payment may be made solely on the basis of medical necessity without an accompanying prescription. Purchase is limited to one initial device per missing body part.

Note: Generally, breast prosthesis is replaced every two years. Requests for a replacement prior to a two-year period are subject to medical review to determine reason for replacement.

C. The selection of an appropriate device will depend on fit, functional performance and patient acceptance. The physical evaluation will include, as applicable, residual limb length and circumference, active range of motion, terminal device grasp force and mechanical range.

D. Myoelectrical prostheses are not excluded from coverage. As an example, a myoelectrical prosthesis with a hand is an acceptable alternative to conventional prosthesis with a hook.

E. The appropriate HCPCS code (V2623-V2629) should be used for the supply of custom ocular prostheses or service that is covered when furnished incident to physician's services or on a physician's order. Pricing of Level II HCPCS codes will follow the allowable charge methodology.

F. Prosthetic devices with a FDA approved IDE (investigational device exemption) categorized by the FDA as non-experimental/investigational (FDA Category B) will be considered for coverage. Coverage is dependent on the device meeting all other requirements of the law and rules governing CHAMPVA and upon the beneficiary involved meeting FDA approved IDE study protocols (see Chapter 2, Section 17.8, *Requirements for Food and Drug Administration Approval for Medical Devices).*

G. ACDs/SGDs are characterized by the following:

1. Being a dedicated speech device, used solely by the individual who has severe speech impairment.

2. May have digitized speech output, using pre-recorded messages, less than or equal to 8-minutes recording time.

3. May have digitized speech output, using pre-recorded messages, greater than 8-minutes recording time.

4. May have synthesized speech output, which requires message formulation by spelling and device access by physical contact with the device-direct selection techniques.

5. May have synthesized speech output, which permits multiple methods of message formulation and multiple methods of device access.

6. May be software that allows a laptop computer, desktop computer or PDA (Personal Digital Assistant) to function as a speech-generating device.

H. Computer based and PDA based ACDs/SGDs are covered when they have been modified to run only ACD/SGD software.

VI. EXCLUSION

A. Prosthetic devices categorized by the FDA as experimental/investigational (unproven) (FDA Category A).

B. Examples of devices and communication aids that are excluded from coverage as ACDs/SGDs include, but are not limited to the following:

1. Devices that are not dedicated speech devices, but are devices that are capable of running software for purposes other than for speech generation, that is, devices that can also run a word processing package, an accounting program, or perform other non-medical functions.

2. Laptop computers, desktop computers, or PDAs, which may be programmed to perform the same function as a speech generating device, are non-covered since they are not primarily medical in nature and do not meet the definition of prosthetic, prosthetic device, prosthetic supply, or durable medical equipment.

3. A device that is useful to someone without severe speech impairment is not considered an SGD.

4. Picture books

5. Flashcards

6. Braille typewriters

7. TTY devices (Text Telephone)

8. Devices that allow the patient to communicate messages to others with writing, such as a display screen or printout, rather than with synthesized speech, and devices that allow the user to communicate with a computer rather with another person. Although these devices may be useful, they do not meet the definition of an ACD/SGD prosthetic or durable medical equipment.

END OF POLICY